Dear Children, Families, Health, and Human Services Interim Committee,

My name is Shannon Petersen and I am a social worker at Billings Clinic. There have been occasions I have been a part of or have witnessed unfortunate situations where individuals are not able to care for themselves, are not able to make decisions about their care needs and do not have family or friends who are able to assist with decision making. These individuals need a higher level of care, such as a nursing facility, to assist them with their care needs. However, there is no one who is available to participate in decision making on behalf of these individuals. These people usually end up in the acute care hospital setting as their social situations have become so bad and there is no other option for them but to be in the hospital for their own safety. At this point, discharge planning begins and options for these individuals are looked at. However, these options are extremely limited, if not totally unavailable, due to no family or friend involvement, or anyone who is able to speak on behalf of the patient. Skilled nursing facilities are not able to admit patient's who are not able to knowingly sign themselves in or have someone who is able to make decisions on their behalf. This leaves the patient in the hospital indefinitely while we try to search for family or friends who may be able to help by petitioning for guardianship. When this does not work out, as it rarely has in some cases, we have worked diligently with Adult Protection Services to try to identify someone who may be able to step into this role. There have been times when patients have passed away in the hospital before this has been able to occur. Having a fully functioning quardianship program would help to eliminate this lengthy process and expedite their placement in a facility that will be able to provide the care these individuals need.

Sincerely,

Shannon Petersen, MSW Outpatient Care Management Billings Clinic